

Atty. Dkt. No. 032026-0485

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Gianchandani, et al.

Title: METHOD AND APPARATUS
FOR ETCHING AND
DEPOSITION USING MICRO-
PLASMAS

Appl. No.: 09/686,259

Filing Date: October 11, 2000

Examiner: George Goudreau

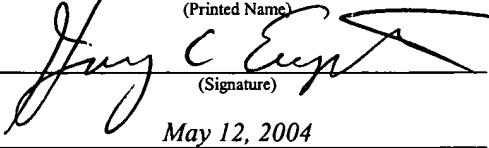
Art Unit: 1763

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450, on the date below.

Harry C. Engstrom

(Printed Name)


May 12, 2004

(Signature)

May 12, 2004

(Date of Deposit)

Mail Stop AMENDMENT
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

This communication is responsive to the Non-Final Office Action dated March 10, 2004, concerning the above-referenced patent application.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this document.

Remarks/Arguments begin on page 11 of this document.

Please amend the application as follows:



1763
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Tfw

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<i>Harry C. Engstrom</i> (Printed Name)	
<i>Harry C. Engstrom</i> (Signature)	
May 12, 2004 (Date of Deposit)	

AMENDMENT TRANSMITTAL

Mail Stop AMENDMENT
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee required for additional claims is calculated below:

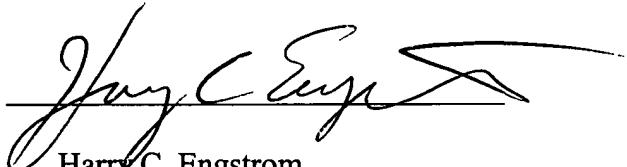
	Claims As Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims:		- 62 =	0 x	\$18.00 =	\$0.00
Independent Claims:	5	- 5 =	0 x	\$86.00 =	\$0.00
First presentation of any Multiple Dependent Claims:			+ \$290.00 =		\$0.00
			CLAIMS FEE TOTAL =		\$0.00

	EXTENSION FEE TOTAL:	\$0.00
<input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$110.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$0.00
<input checked="" type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):		\$0.00
	TOTAL FEE:	\$0.00

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-2350. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-2350. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-2350.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

By 
 Harry C. Engstrom
 Attorney for Applicants
 Registration No. 26,876

Dated: May 12, 2004

FOLEY & LARDNER LLP
 Customer Number: 23524

Telephone: (608) 258-4207
 Facsimile: (608) 258-4258